REASON FOR THIS TRANSMITTAL

Federal Law or Regulation

Court Order or Settlement

or More Counties

Clarification Requested by One

State Law Change

Change

Agreement

Initiated by CDSS

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[X]

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



February 26, 1999

ALL-COUNTY INFORMATION NOTICE	E NO. I-17-99
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TO: ALL COUNTY WELFARE DIRECTORS ALL WELFARE-TO-WORK COORDINATORS

SUBJECT: WELFARE-TO-WORK (WtW) GRANT STATE MATCH SURVEY

REFER: ALL-COUNTY LETTER NO. 98-90 (Dated November 18, 1998);

ASSEMBLY BILL 382 (Chapter 6, Statutes of 1998)

We are requesting your assistance in completing the attached WtW Grant State Match Survey as soon as possible, but no later than <u>APRIL 10, 1999</u>. This information is necessary for the upcoming legislative budget hearings scheduled for April 1999. At that time, the Department must be prepared to respond to questions from the legislators regarding the expenditures of the state WtW Grant matching funds by the county welfare departments (CWDs). Because of the late start of the WtW Grant Program in California, there is insufficient data to report for the first and second quarters. After consulting with the County Welfare Directors, who are members of the WtW Grant Program Advisory Committee, we designed this survey to take as little of your time as possible to complete while providing the statistics that are needed.

Please send the attached form to: Pat Loader, fax number (916) 654-1048. We apologize for this additional request but there is no other way to obtain this information in time for the hearings. We appreciate your assistance and thank you for your timely response. If you have any questions, please contact Pat at (916) 654-1770.

Sincerely,

Original Document Signed By Charr Lee Metsker on 3/26/99

CHARR LEE METSKER, Chief Employment and Eligibility Branch

Attachment

c: CWDA CSAC CCWRO

WELFARE-TO-WORK (WtW) GRANT STATE MATCHING FUND EXPENDITURE SURVEY

FAX TO:	(916) 654-1048	3					
ATTENTION:	Pat Loader, Wt Employment B	W Grant Project Aureau	Analyst				
County			Date o	Date of survey:			
Contact Person_	(Please prin	t or type name)	_ Phone	Number: (_)		
• The time period	od this survey covers	s (beginning and endi	ng dates)	September	17 through March 3	1, 1999	
Total state Wt	W Grant matching f	fund allocation for Fig	scal Year 19	998/99	\$		
Total Acc	rued Expenditures:				\$	_	
• If known, wha	t services are being	provided using the W	VtW Grant 1	matching fund	s:		
Job Place	nity Services Vage Subsidies ment Services ntion Services	Work Experies On-the-Job T Post-Employi Supportive Se	raining ment	Public Job Rea Job Sea other	Wage Subsidies adiness Services arch		
Comments:							